# **FORM D**

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

washington, D.C. 2

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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	OM	IB APPROV	AL `					
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Name of Offering (□ check if this		•	change.)	····	<del></del>			
Apprecia Capital Fund I LP Lin	nited Partnership Intere	sts						
Filing Under (Check box(es) that	apply):   Rule 504	☐ Rule 505	<b>⊠</b> Rule 506	☐ Section 4(6)	□ ULOE			
Type of Filing:	lew Filing	☐ Amendment						
	A. BA	SIC IDENTIFICATION D	ATA	1633 1118 1811 1818 1818				
1. Enter the information requeste	d about the issuer							
					<u>                                     </u>			
Name of Issuer ( check if this is	an amendment and name	has changed, and indicate ch	nange.)	020	04855			
Apprecia Capital Fund I LP				030	104633			
Address of Executive Offices		reet, City, State, Zip Code)	Telephone Num	ber (Including Area (	Code)			
350 West 57th Street, No. 2F, Ne	w York, New York 1001	19	(212) 765-2618					
Address of Principal Business Ope	erations (Number and St	reet, City, State, Zip Code)	Telephone Num	ber (Including Area (	Code)			
(if different from Executive Office	es)							
Brief Description of Business								
Investing and trading in securit	es for own account				PROCESSED			
Type of Business Organization								
☐ corporation	limited partnersh	ip, already formed 🛚 other	(please specify):		JAN 2 8 2003			
☐ business trust	☐ limited partnersh	nip, to be formed			JAN 2 0 2003			
					THOMSON			
		_MonthYe	ar					
Actual or Estimated Date of Incor	poration or Organization:	0 8   0	2	Actual	☐ EstiFiNANCIAL			
				DE				
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:								
	CN for C	anada; FN for foreign jurisdi	ction)					

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CRF 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Avenue, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### States

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this from. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General Partner Full Name (Last name first, if individual) Apprecia Capital Management LLC Business or Residence Address (Number and Street, City, State, Zip Code) 350 West 57th Street, No. 2F, New York, New York 10019 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General Partner Full Name (Last name first, if individual) Apprecia Capital Advisors LLC Business or Residence Address (Number and Street, City, State, Zip Code) 350 West 57th Street, No. 2F, New York, New York 10019 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director E Principal of General Partners Full Name (Last name first, if individual) Rick D. Puglisi Business or Residence Address (Number and Street, City, State, Zip Code) 350 West 57th Street, No. 2F, New York, New York 10019 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Principal of General Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	1.1			i di N				ABOUT						100	
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes	No X					
Answer also in Appendix, Column 2, if filing under ULOE.															
2.	What is	the minim	um invest	ment that	will be ac	cepted fro	m any ind	ividual	to accept	lesser am	ounte	•••••		\$250,0	00*
3.	Does the	offering	narmit ioi:		•				-					Yes	No
J.	Does are	onering	permit jon	iii owiicisi	np or a sn	igic unit:	•••••				•••••••		•••••		I
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission										ission o					
	remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5 persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer.														
Full	Name (L	ast name t	first, if inc	lividual)											
Busi	iness or P	tesidence.	Address (	Number a	nd Street,	City, State	, Zip Cod	e)							
Nan	ne of Asse	ociated Br	oker or D	ealer											
State	e in Whic	h Person l	Listed Has	s Solicited	or Intend	s to Solici	t Purchase	ers							
	(Check '	'All States	or chec	k individu	al States)									All	States
	[AL] [IL] [MT] [RI]	[AK] [IN ] [NE] [SC]	[AZ] [lA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] . [UT]	[CT] [ME] [NY] [VT]	[DE ] [MD] [NC] [VA]	[DC ] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI ] [MS] [OR] [WY]	[ID ] [MO] [PA] [PR]		
Full		ast name				. []	Ç J	,			()	L J	( · · · · · · ·		
					nd Street,	City, State	e, Zip Cod	le)							
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					or Intend	is to Solici	t Purchase	ers							
5 <b></b> .								••••				è			States
									[DC]		[GA]			L	~ tates
	[AL] [IL ] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE ] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [Wl]	[HI ] [MS] [OR] [WY]	[ID ] [MO] [PA] [PR]		
Full	Full Name (Last name first, if individual)														
Bus	Business or Residence Address (Number and Street, City, State, Zip Code)														
Nan	Name of Associated Broker or Dealer														
Stat	State in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
	(Check	"All State	s" or chec	k individu	al States)									All	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [lA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE ] [MD] [NC] [VA]	[DC ] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI ] [MS] [OR] [WY]	[ID ] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OR INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	0	\$	0
	Equity	\$_	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$_	0	\$	0
	Partnership Interests	\$	*	\$	0,
	Other (specify):	\$	0	\$	0
	Total Answer also in Appendix, Column 3, if filing Under ULOE	\$	*	\$	0
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings Under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	_	0	. \$	0
	Non-accredited Investors		0	\$	0
	Total (for filings Under Rule 504 only)		*	\$	*
	Answer also in Appendix, Column 4 if filing under ULOE				
3.	If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505	_		_ \$	
	Regulation A			_ \$	
	Rule 504			_ \$_	
	Total			\$	

\*No minimum or maximum amount

## C. OFFERING PRICE, NUMBER OR INVESTORS, EXPENSES AND USE OF PROCEEDS a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees.... Printing and Engraving Costs \$ 2,000 Legal Fees..... × \$ <u>14,000</u> Accounting Fees \$ 5,000 X Engineering Fees Sales Commissions (Specify finder's fees separately)..... \$ 1,000 Other Expenses (identify) delivery, mailing, fax, telephone, transportation..... X Total ..... \$ 24,000 b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer.".... Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the Payments to amount for any purpose is not known, furnish an estimate and check the Officers, box to the left of the estimate. The total of the payments listed must Directors, & equal the adjusted gross proceeds to the issuer set forth in response to Payments to Affiliates Part C - Question 4.b above. Others Salaries and Fees..... Purchase of real estate..... Purchase, rental or leasing and installation of machinery and equipment ...... Construction or leasing of plant buildings and facilities...... Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) .. Repayment of indebtedness ..... Working capital ..... \$\*All adjusted gross proceeds □ Other ..... Column Totals ...... \$\*All adjusted gross proceeds

\*No minimum or maximum amount

## D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. See below

Issuer (Print or Type)	Signature	Date
Apprecia Capital Fund I LP	Apprecia Capital Management LLC	September <u>/8</u> , 2002
	By: Rid Day C:	
Name of Signer (Print or Type)	Title (Print or Type)	
Rick D. Puglisi	Managing Member	

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001)

## E. STATE SIGNATURE

1.	Is any party described								Yes	No
	disqualifications provision	is of such rul	le?	•••••	•••••	• • • • • • • • • • • • • • • • • • • •	 ••••••	 		X

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

See below

Issuer (Print or Type) Apprecia Capital Fund I LP	Signature Apprecia Capital Management LLC	Date September //, 2002
	By: Rid Musto	
Name of Signer (Print or Type) Rick D. Puglisi	Title (Print or Type)  Managing Member	

## Instructions:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

#### **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001)